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URBAN DISTRICT OF SEDGLEY
(STAFFORDSHIRE)

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND OF THE

CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

1958

URBAN DISTRICT OF SEDGLEY,
(STAFFORDSHIRE).

A N N U A L R E P O R T S

of the
Medical Officer of Health
and
Public Health Inspector

for the year
1958.

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SEDGLEY URBAN DISTRICT COUNCIL.

PUBLIC HEALTH COMMITTEE.

Chairman:

Councillor F. S. Dews.

Councillors :

Mrs. E. E. Williams, J.P., C.C.
(Chairman of the Council).

A. W. Bradley

J. P. Fithern

T. P. Hanley

H. G. Marsh

K. E. Millard

T. Parkin

J. E. Timmins, C.C.

G. A. Turner.

PUBLIC HEALTH STAFF

Medical Officer of Health:

S. C. J. Falkman, L.R.C.P.(Ed.), L.R.C.S.(Ed.), L.R.F.P. & S. (Glas.),
L.M.Rotunda (Dublin), D.R.C.O.G. (London), D.P.H. (Durham).
(Died 4th August, 1958).

F. B. Mackenzie, D.S.O., M.C., M.A., M.B., Ch.B., D.P.H. (Acting).

Chief Public Health Inspector and Cleansing Superintendent :

David J. W. Robertson, Cert. S.I.B., M.A.P.H.I., M.Inst.P.C.,
Cert. Meat and Food Inspector.

Additional Public Health Inspectors :

R. B. M. Anderson, A.R.S.H., A.I.P.H.E., M.R.I.P.H.H., M.A.P.H.I.,
Cert. Meat and Food Inspector.

J. Kirk, Cert. S.I.B., M.A.P.H.I., Cert. Meat and Food Inspector.
(Resigned 13th June, 1958).

Clerical Staff:

Mrs. F. Detheridge,

Miss S.K. Oakley.

Official Address and Telephone Number of Medical Officer of Health :-

"The Limes," Dudley Road, Sedgley, Staffs. Sedgley 3101
Private Telephone No. :- Wombourne 2392

STATISTICAL SUMMARY 1958.

Area : 3,830 acres

Population : 25,330

Number of Inhabited houses : 7,600

Sum represented by a Penny Rate : £855.

Rateable Value : £219,006.

General Rate : 18/-

Birth Rate : 13.89 (Crude)
13.47 (Standardised)

16.5 (England and Wales)

Death Rate : 18.08 (Crude)
10.48 (Standardised)

11.7 (England and Wales)

Infantile Death Rate, per 1,000 Births : 34.09
England and Wales 22.5

Deaths from Respiratory Tuberculosis : 3

from other Tuberculosis Diseases: Nil

Respiratory Tuberculosis Death Rate : .118

from other Tuberculosis Diseases Nil

Average Death Rate from Respiratory Tuberculosis for ten
previous years : .273

Average Death Rate from other forms of Tuberculosis for ten
previous years : .029

REPORT OF THE MEDICAL OFFICER OF HEALTH
for 1958.

To the Chairman and Members of the Sedgley Urban District Council.

Mr. Chairman, Lady and Gentlemen,

As Acting Medical Officer of Health, I submit my Annual Report for the year 1958, in accordance with the requirements of Ministry of Health Circular 22/58, incorporating the Report of your Public Health Inspector.

Before making my observations relevant to what follows in the body of the Report on the year's activities, I am sure you would wish me on your behalf to express appreciation of the services of your late Medical Officer of Health, Dr. S.C.J. Falkman, from whom I took over as Acting Medical Officer in August.

He was a most vigilant and painstaking Medical Officer. From his Annual Reports during his five years of office he was most watchful in all matters affecting the health of the district, and his enthusiasm for observance of the Food Hygiene Regulations was unbounded.

The health of your Urban District would appear to have been satisfactory throughout the year under review. There has been no invalidity attributable to causes or factors related to conditions which could be considered as coming within the province of public health preventive measures, nor has there been any heavy incidence of infectious disease.

In the body of the report will be found information relating to :-

- (a) General Provision of Health Services.
- (b) Vital Statistics.
- (c) Prevalence and Control over Infectious and other diseases.
- (d) General Public Health.
- (e) Sanitary Circumstances of the Area.
- (f) Housing.
- (g) Work which falls within the sphere of your Public Health Inspector in relation to safeguarding the health of the community.

Legislation as affecting the public health tends to become so much more embracing and accumulative that a most intimate knowledge of the enactments and procedure is required by your Public Health officers.

The following major regulations affecting the work of the Department were introduced during the year under review :-

The Slaughter-houses (Hygiene) Regulations 1958.

These regulations deal with the hygienic construction, layout and equipment of slaughter-houses and the practices to be observed therein.

The Slaughter of Animals (Prevention of Cruelty) Regulations, 1958.

These Regulations re-enact the Slaughter of Animals (Prevention of Cruelty) Regulations, 1954, with certain amendments and additional requirements.

These two Regulations will not be fully operative for some considerable period but they are a decisive step in the future control of slaughtering and slaughterhouses.

Clean Air Act. Parts of this Act come into operation specifying the maximum period for the emission of black smoke.

Other minor legislation was made under the Prevention of Damage by Pests Act, 1949, and the Milk and Dairies Regulations.

Considerable attention has been given by your Public Health Inspector throughout the year to the standard of food hygiene conditions prevailing in the district. It cannot be too fully realised that Food Hygiene forms a most important part of the system to safe-guard the public health. Unhygienic housing conditions are bad enough, but the consequences are of the nature of delayed action when compared with the immediate action of contaminated food.

Your Council is to be commended on their contemplated intention to introduce by stages Smoke Control areas in the Urban District.

The task of establishing a smoke control area, in an area in which coal burning houses now exist, will be a considerable one and will involve individual inspection of each house to ascertain that the fireplaces used are capable of burning smoke-less fuel and if not, then advising the tenant of the adaptations or replacements which will have to be carried out and as to what contributory grants towards the cost can be made.

I thank the Housing and Tenancies Committees for the sympathetic consideration they have given to cases referred to them for re-housing on medical grounds. At the same time I am constrained to make some observations on the housing situation.

By far, the largest number of interviews sought with me are to solicit my help in obtaining a Council house. In the majority of cases their application is based on medical grounds or ill-health attributable to unsatisfactory housing conditions and one cannot but sympathise with them in their anxiety.

They see new Council houses going up in the district and they cannot have one and to them the explanation given is a disappointing one when you tell them that such houses are to house families whose houses are under Demolition Orders or are in Clearance Areas or are for overspill purposes, and that the only hope for them at the moment is the possibility of re-lets turning up; and there again they are up against a long waiting list which might put their application back a considerable length of time.

With a view to helping in this unhappy situation I would suggest that in allocating tenancies, applications should not be subjected to rigid time and length of application qualification. Consideration of the urgency of the application is always the procedure to be recommended.

It is unfortunate that on account of the subsidy position which only operates in respect of houses to replace houses under Demolition Orders or in Clearance Areas or for Overspill purposes that a proportion of the new Council houses going up cannot be allocated for general housing purposes, a position which militates against the recommendation I have made above.

On the other hand there is an increasing tendency for many to think that the Local Authority should find houses for them. There is no such obligation.

Of course, with a view to ensuring better prospects for general need applicants the Local Authority themselves might give consideration to the building of houses and charging economic rents to meet the cost; but this would not be looked upon with any great favour by those on the present waiting list or by future applicants when at the present moment they see so many who are occupying subsidised houses at comparatively much lower rents.

In view of prevailing prosperity I feel that the Ministry of Housing would not be inclined to look upon the idea of granting subsidy for General Purpose houses with favour, with the exception perhaps of small houses for Old People.

Close and efficient supervision of the sanitary circumstances of the district has been given by your Public Health Inspectors and in particular your Chief Inspector is deserving of appreciation and thanks for the assiduous attention he has given to the housing conditions of your urban district and for

the arduous and time consuming work he has put into the task of determining Clearance Areas.

It is a source of satisfaction, and not before time, that the proposal for the erection of a new Infant Welfare Centre at Lower Gornal has now been approved. It is earnestly hoped that tenders for carrying out the work in the near future will be invited.

I convey to the Chairman and Members of the Health Committee my appreciation of the help and support they have given me throughout the year.

To your Clerk, your Surveyor, and all other colleagues, administrative or clerical, I would also express appreciation of their co-operation.

I have the honour to be,

Your obedient Servant,

F. B. MACKENZIE,

Acting Medical Officer of Health.

November, 1959.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

The Medical Officer of Health holds office in virtue of a joint appointment by the Sedgley Urban District Council, the Tettenhall Urban District Council, and the Staffordshire County Council on a time distribution basis of 5/11ths, 2/11ths and 4/11ths respectively.

As Medical Officer of Health of the Urban District his duties are those laid down under the various Public Health Acts and Regulations, in short to inform himself of all matters likely to affect the health of the Urban District and to advise the Council in such matters and to make an Annual Report on the work of the Public Health Department and the health of the district.

As Assistant County Medical Officer he undertakes such School Medical Inspections, Minor Ailment School Clinics, Immunisation Sessions and Maternity and Child Welfare Clinics in the Urban District as may be directed by the County Authority.

The Public Health Inspector is a full time appointment by the district authority. He is a qualified Meat and Food Inspector. Under the general direction of the Medical Officer of Health he performs all the duties imposed on a Public health inspector by statute and by any orders, regulations or directions from time to time made or given by the Minister, and by any byelaws or instructions of the local authority applicable to his office. He is assisted in his duties by two additional Health Inspectors.

Public Health and Sanitary matters are brought forward in the Public Health Committee, while Housing and Rehousing matters are dealt with in the Housing Committee and the Housing (Tenancies) Committee. These three Committees meet once monthly.

There are three Health Visitors for the District, three District Nurses and three Midwives, all under the direction of the County Council.

In accordance with Part III of the National Health Service Act the following services are provided by the Local Health Authority, namely the County Council, the organisation and administration being in the hands of the County Medical Officer of Health.

- (a) Health Centres.
- (b) Care of Mothers and Young Children.
- (c) Midwifery.
- (d) Health Visiting.
- (e) Home Nursing.
- (f) Vaccination and Immunisation.
- (g) Ambulance Services.
- (h) Prevention of Illness, care and after care.
- (i) Domestic Help.
- (j) Mental Health Services.

With the exception of Provision of Health Centres, all the required services are being provided within the area.

There will probably be some delegation of Part III functions and other powers to the district authority in the near future.

SCHOOL HEALTH SERVICES.

The Medical Inspection of School Children is provided by the County Council who have also established Ophthalmic, Dental and Orthopaedic Clinics. The various age groups are examined periodically and from the School Inspections referred to these Clinics or to the General Practitioner if so required.

In cases of Infectious Disease, and if deemed necessary special steps are taken in conjunction with the School Authorities to exclude scholars who have been in contact with such disease. Protective measures and isolation are furthermore under the direction of the Health Department.

The School, Dental, Ear, Nose and Throat, and Eye Clinics provided in the Urban District are given in a separate table together with sessions for Speech Therapy and Physiotherapy.

MATERNITY AND CHILD WELFARE.

The Staffordshire County Council maintains Ante-Natal and Child Welfare Centres in the Sedgley, Upper Gornal and Lower Gornal areas. The Regional Hospital Board provides in addition Ante-Natal Clinics in their own Hospitals and Departments in the Wolverhampton, Dudley and Birmingham areas which are easily accessible to the population of the Urban District.

The Rosemary Ednam Maternity Home which forms part of the Burton Road Hospital, and Wordsley Hospital, are under the administration of the Regional Hospital Board. They provide accommodation for cases referred or booked from the Ante-Natal Clinics or by General Practitioners. Cases wishing to remain at home are delivered by the County Midwives, who, if so required, can call for the obstetric assistance of a General Practitioner.

The Staffordshire County Council also provides for the care and treatment of deformed, mentally sub-normal and handicapped children. These cases are selected from School Medical Inspections and Child Welfare Clinics or referred by General Practitioners. Illegitimate, homeless or neglected children are provided for in the Nurseries, Children's Homes and Remand Homes of the County.

NATIONAL ASSISTANCE ACT, 1948.

Since the passing of this Act the former Public Assistance Services ceased and were taken over by the National Assistance Board under the Ministry of National Insurance. The functions of the Relieving Officers have therefore been discontinued and replaced by the Officers of the National Assistance Board. The National Assistance Board holds no office in the Sedgley Urban District.

As under the National Health Insurance everyone is now medically insured, the medical supervision and treatment of necessitous cases has become the responsibility of the Medical Practitioners and the Regional Hospital Board. Other classes of necessitous cases, such as homeless, abandoned or neglected individuals are the responsibility of the County Welfare Authorities.

HOSPITALS.

Administration of Hospitals and Specialist Services is the responsibility of the Birmingham Regional Hospital Board.

The Hospitals and Specialist Departments serving the district and easily accessible, are those of Wolverhampton, Dudley and Birmingham.

Hospital treatment for cases suffering from Infectious Disease and in need of such treatment is provided in Moxley Hospital.

TUBERCULOSIS.

Institutions are maintained by the Regional Hospital Board for the treatment of persons suffering from Tuberculosis. The visiting of Tuberculous patients in relation to their care and after-care is under the administration of the County Council. Chest Clinics are situated at Dudley and Wolverhampton and several sanatoria are available.

LABORATORY FACILITIES.

Pathological and Bacteriological examinations are made by the Public Health Laboratory Service in Stafford.

CLINICS AND TREATMENT CENTRES.

1. THE QUADRANT, SEDGLEY.

ANTE-NATAL CLINIC.

Friday morning fortnightly.

CHILD WELFARE CLINIC.

Wednesday afternoon weekly.

SCHOOL CLINIC.

Wednesday morning fortnightly.

SPEECH THERAPY.

Tuesday all day weekly.

DENTAL CLINIC.

Saturday morning weekly.

PHYSIOTHERAPY.

Friday afternoon weekly.

2. BLEAKHOUSE, UPPER GORNAL.

ANTE-NATAL CLINIC.

Friday morning fortnightly.

CHILD WELFARE CLINIC.

Tuesday afternoon weekly.

SCHOOL CLINIC.

Tuesday morning weekly.

EYE CLINIC.

Periodically.

E.N.T. CLINIC.

Periodically.

3. LOWER GORNAL.

CHILD WELFARE CLINIC.

Friday afternoon weekly.

SCHOOL CLINIC.

Friday morning fortnightly.

The days and times at which Clinics are held are liable to alteration from year to year.

AREA WELFARE OFFICER - Mr. R.C. Cox, 6A Birch Street, Wolverhampton.
 CHILD WELFARE OFFICER - Miss White, 153 Tettenhall Road, Wolverhampton.
 SOCIAL WORKER - Miss Burd, Old Police Buildings, Dudley,

AMBULANCES.

The Ambulance Services are operated by the County Council. The movement of all sitting and stretcher cases is controlled by Darlaston Station (Telephone Number James Bridge 2591). Radio is fitted to approximately 50% of the vehicles and intercommunication and contact is operated through Darlaston. This should contribute to the speeding-up of the service.

The movement of Infectious Diseases, with the exception of Smallpox, is also dealt with through Darlaston.

DOMESTIC HELP SERVICE.

The number of Domestic Helps who gave service in the Urban District during the year was 16, together with two temporary Helps. The number of Neighbourly Helps employed was 3.

SEDGLEY MORTUARY.

In the beginning of the year 1958 the Public Works Committee approved the drawings of the proposed new Mortuary and the necessary application to be made for Planning permission. Subject thereto, application is to be made to the Ministry for approval of the scheme in principle.

The number admitted to the existing Mortuary during the year was 33.

VITAL STATISTICS.

	TOTAL	M	F
LIVE BIRTHS	352	188	164
Legitimate	344	183	161
Illegitimate	8	5	3
Live Birth Rate per 1,000 population (Crude)	13.89
Standardised Birth Rate	13.47
Still-births	10
Still-birth Rate per 1,000 Live and Still-births	27.62
Total Live and Still-births	362
Infant Deaths	12
Infant Mortality Rate per 1,000 live births	34.09
Legitimate Infant Mortality Rate per 1,000 legitimate live births	34.88
Illegitimate " " " " illegitimate live births	Nil
Neo-natal (first four weeks) Mortality Rate per 1,000 live births	17.04
Illegitimate live births per cent. of total live births	2.27%
Maternal deaths (including abortion)	1
Maternal mortality rate per 1,000 live and still-births	2.762

	TOTAL	M	F
Deaths	458	227	231
Death Rate (Crude)	18.08
Standardised Death Rate	10.48
Deaths from Cancer (all ages)	42
Deaths from Measles (all ages)	Nil
Deaths from Whooping Cough (all ages)	Nil
Deaths from Gastritis, Enteritis and Diarrhoea	2

OBSERVATIONS ON VITAL STATISTICS.

No two districts are exactly alike as regards the composition of their respective populations. With this in mind the Registrar General supplies for each local area what are known as "Comparability Factors" in respect of births and deaths by which corrected or standardised rates for the district may be arrived at.

In addition the death rate comparability factor is adjusted specifically to take account of any residential institutions in the area.

The Birth comparability factor for Sedgley is given as 0.97. The Standardised Birth Rate for the district is therefore 13.47 (13.89×0.97) which is lower than the rate for England and Wales 16.4

The Death comparability factor is given as 0.58. The Standardised Death Rate for the district is therefore 10.48 (18.08×0.58) which is lower than the death rate per thousand of population in England and Wales 11.7

The predominating causes of adult death continue to be Heart Disease, Intracranial and Vascular Lesions, Cancer and Bronchitis. Cancer of Lung and Bronchus shows a decrease from 17 last year to 5, and Cancer all forms from 65 to 42.

The Infantile Mortality rate of 34.09 per 1,000 live births is a decrease on last year when it was 46.75. The rate for England and Wales is 22.5 which rate is a continued decline for the country as a whole. A decrease in the district rate is therefore welcomed.

The rate would appear to oscillate strongly from year to year. It might therefore be preferable in comparing and commenting on previous years to refer to the actual number of deaths which have occurred rather than rates. For example the infantile deaths last year were 18 and this year 12. Comparison with rates for earlier years may have little statistical significance when based on small numbers. Rates might therefore be disregarded in relation to preceding years for comparative purposes.

BIRTH RATES.

Year	SEDGLEY		England & Wales Birth Rate
	Number of Births	Birth Rate	
1949	359	16.32	16.7
1950	327	14.27	15.8
1951	373	16.09	15.5
1952	329	14.11	15.3
1953	312	13.18	15.5
1954	304	12.74	15.2
1955	293	12.34	15.0
1956	345	14.29	15.7
1957	385	15.62	16.1
1958	352	13.89	16.4

1949	241	10.22			
1950	251	10.95	-		11.6
1951	293	12.64	-		12.5
1952	260	11.15	-		11.3
1953	677	28.6	-		11.4
1954	742	31.09	-		11.3
1955	726	30.58	-		11.7
1956	642	26.605	10.90		11.7
1957	592	24.01	11.28		11.5
1958	458	18.08	10.48		11.7

Note:- In respect of the years 1953 to 1958 inclusive the sharp increase in the number of deaths and in the crude death rate is accounted for by the fact that deaths in Burton Road Hospital of residents over 6 months have to be accepted. Previous to 1953 such deaths in Burton Road Hospital were not allocated to Sedgley. The crude death rate figures for 1953 to 1958 might therefore be disregarded for comparison purposes and the standardised death rates accepted for future years.

INFANTILE MORTALITY 1958.

Nett Deaths from causes stated at various ages under one year of age

CAUSE OF DEATH	Under 1 week		1 to 2 weeks		2 to 3 weeks		3 to 4 weeks		TOTAL under 1 month		1 to 3 months		3 to 6 months		6 to 9 months		9 to 12 months		TOTAL DEATHS under 1 year			
	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
Prematurity									2												2	
Broncho Pneumonia		1		1		1		1	1	1	1	1	1	1	1	1	1	1	1	1	3	
Congenital Abnormalities		1		1		1		1	1	1	1	1	1	1	1	1	1	1	1	1	3	
Asphyxia		1		1		1		1	1	1	1	1	1	1	1	1	1	1	1	1	2	
Gastro Enteritis		1		1		1		1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Intracranial Haemorrhage	1		1		1		1		1		1		1		1		1		1		1	1
	4		1		1		1		2		6		3		2		1		1		12	

OPHTHALMIA NEONATORUM.

No case of the disease was notified in the Sedgley Urban District during the year.

INFANTILE MORTALITY RATES.

Year	SEDGLEY			England & Wales Rate per 1,000 Births
	Births	Deaths	Rate per 1,000 Births	Rate per 1,000 Births
1949	359	16	44.56	32
1950	327	17	51.98	29.8
1951	373	10	26.81	29.6
1952	329	9	27.35	27.6
1953	312	6	19.23	26.8
1954	304	13	42.76	25.5
1955	293	13	44.37	24.9
1956	345	10	28.98	23.8
1957	385	18	46.75	23.0
1958	352	12	34.09	22.5

CAUSES OF DEATH DURING THE YEAR 1958.

					M.	F.
1.	Tuberculosis, respiratory	...	...	...	2	1
2.	Tuberculosis, other	...	...	...	-	-
3.	Syphilitic disease	...	...	...	-	-
4.	Diphtheria	...	...	...	-	-
5.	Whooping cough	...	...	...	-	-
6.	Meningococcal infections	...	...	...	-	-
7.	Acute poliomyelitis	...	...	...	-	-
8.	Measles	...	...	...	-	-
9.	Other infective and parasitic diseases	...	...	...	-	-
10.	Malignant neoplasm, stomach	...	...	...	5	6
11.	Malignant neoplasm, lung, bronchus	...	...	...	5	-
12.	Malignant neoplasm, breast	...	...	...	-	6
13.	Malignant neoplasm, uterus	...	...	...	-	-
14.	Other malignant and lymphatic neoplasms	...	...	15	6	
15.	Leukaemia, aleukaemia	...	...	...	-	-
16.	Diabetes	...	...	...	1	3
17.	Vascular lesions of nervous system	...	...	22	42	
18.	Coronary disease, angina	...	...	34	27	
19.	Hypertension with heart disease	...	...	5	6	
20.	Other heart disease	...	...	49	58	
21.	Other circulatory disease	...	...	9	3	
22.	Influenza	...	...	...	-	3
23.	Pneumonia	...	...	12	12	
24.	Bronchitis	...	...	24	4	
25.	Other diseases of respiratory system	...	...	1	-	
26.	Ulcer of stomach and duodenum	...	...	4	-	
27.	Gastritis, enteritis and diarrhoea	...	...	-	2	
28.	Nephritis and nephrosis	...	...	1	1	
29.	Hyperplasia of prostate	...	...	2	-	
30.	Pregnancy, childbirth, abortion	...	...	-	1	
31.	Congenital malformations	...	...	3	4	
32.	Other defined and ill-defined diseases	...	...	21	37	
33.	Motor vehicle accidents	...	...	1	1	
34.	All other accidents	...	...	8	8	
35.	Suicide	...	...	3	1	
36.	Homicide and operations of war	...	...	-	-

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

The prevalence of notifiable diseases during the year shows a marked decrease on last year, the number of notifications being 46 as against 388 last year.

Scarlet Fever.

14 cases notified compared with 2 during 1957.

Whooping Cough.

Only 1 case notified during the year, compared with 32 for the previous year.

Measles.

12 cases notified as against 336 during 1957.

Pneumonia.

14 cases were notified compared with 15 for the previous year.

Dysentery

The number of cases notified was the same for each year viz:-
2 cases.

Poliomyelitis

One case was notified during the year.

This case occurred in a youth 16 years of age, in October, 1958, when he was admitted to hospital where he was for five months, being discharged in March, 1959, with left leg in caliper which was removed in July, 1959.

It was interesting to note that the family, father, mother and son, came from Singapore to this district, but that was 18 months previous to the son's attack, and it is only in recent months that an epidemic of poliomyelitis has been reported in Singapore. The parents state to their knowledge there was no epidemic while they were there.

CASES ADMITTED TO HOSPITAL.

The total number of cases admitted to Hospitals for Infectious Diseases were:-

MOXLEY HOSPITAL.

Scarlet Fever	...	...	3
Broncho Pneumonia	...	...	6
Pneumonia	...	...	3
Infantile Eczema and Bronchial Asthma	...	...	1
Puerperal Pyrexia	...	...	2
Upper Respiratory Infection	...	...	2
Poliomyelitis	...	...	1
Bronchitis	...	...	6
Tonsillitis	...	...	3
Diarrhoea	...	...	1
Epistasis	...	...	1
Vaccinia	...	...	1
Gastro Enteritis	...	...	4
Impetigo	...	...	2

HAYLEY GREEN HOSPITAL.

Sonne Dysentery	...	...	2
Pneumonia	...	...	4
Measles	...	...	1

SWABS and SPECIMENS submitted to the Public Health Laboratory:-

Sputa Swabs	...	...	...	60
Cultures for Myco-Tuberculosis	...	...	42	
Throat Swabs	...	...	...	2
Nose Swabs	...	...	...	1
Faeces	...	...	...	1

The great majority of these sputa swabs were submitted by the Tuberculosis Officer.

SMALL-POX.

Cases of suspected Small-pox are notified to the Small-pox Consultant in cases of doubt who then takes further charge of the disposal of the case. Local protective and preventive measures are under the direction of the Health Department.

GENERAL MEASURES.

School notifications of infectious diseases are received by the Health Department and carefully studied for any features necessitating prompt action and location.

When desirable, the schools are disinfected, and terminal disinfection of premises and articles which have been exposed to infection carried out. Cancer and other cases of long standing disease are dealt with on request.

Disinfection is carried out by the use of formaldehyde lamps and disinfection fluid.

DISINFECTION OF CONTAMINATED CLOTHING AND BEDDING.

An arrangement exists with the Public Health Department, Dudley, for the disinfection of contaminated clothing and bedding if the need should arise.

VACCINATION AND IMMUNISATION.

The County Council does not provide for a Vaccination Centre in Sedgley, but arrangements can be made with the Medical Practitioners by those who wish themselves or their children vaccinated.

Immunisation against Diphtheria and Whooping Cough and Poliomyelitis Vaccination is undertaken in the Child Welfare and School Clinics, while special Immunisation Sessions in Schools provide for an increase in the immunity of the child population. The administration of Poliomyelitis Vaccination is in the hands of the Area Office at Brierley Hill.

Diphtheria Antitoxin is supplied by the Area Office in Brierley Hill to the Child Welfare Clinics and through the Sedgley Public Health Department to the General Practitioners of the Urban District. Vaccination Lymph can be obtained from the Public Health Laboratory in Stafford.

With the advent of Poliomyelitis vaccine, and being in good supply, immunisation sessions have been held in all the schools in the area and at the Clinics in the course of the year.

The acceptance response in respect of school children has been good and it is hoped that a reduction in the incidence of this crippling disease in the country as a whole will result. The intensive campaign that has been carried out against Poliomyelitis has perhaps reacted against the time available for Diphtheria Immunisation but nevertheless a satisfactory level has been maintained, nor has there been any case of diphtheria in the district.

A table furnished by the Ministry of Health gives information which points to the undoubted efficacy of Diphtheria Immunisation.

<u>Year</u>	<u>Deaths</u>	<u>Corrected Notifications</u>
1948	156	3,575
1949	84	1,890
1950	49	962
1951	33	664
1952	32	376
1953	23	266
1954	9	176
1955	13	155
1956	8	53
1957	6	37

We have continued to avail ourselves of the opportunity given by the Central Council of Information to place advertisements in the Local Press in order to stimulate Diphtheria Immunisation.

NATIONAL ASSISTANCE ACT, 1948 - Section 47.

It was not found necessary to exercise powers under this Section of the Act which deals with the care of aged and infirm persons incapable of looking after themselves.

(Excluding Tuberculosis) Notified in 1958.

TUBERCULOSIS.

The number of new cases notified for the year was 10 pulmonary as against 9 pulmonary and 1 non-pulmonary in 1957.

AGE PERIODS	NEW CASES				DEATHS.			
	Pul		Non-Pul		Respiratory		Other	
	M	F	M	F	M	F	M	F
Under 1 year	-	-	-	-	-	-	-	-
1 to 2 years	-	-	-	-	-	-	-	-
2 to 4 years	-	-	-	-	-	-	-	-
5 to 9 years	-	-	-	-	-	-	-	-
10 to 14 years	-	1	-	-	-	-	-	-
15 to 19 years	-	2	-	-	-	-	-	-
20 to 24 years	-	-	-	-	-	-	-	-
25 to 34 years	2	1	-	-	-	1	-	-
35 to 44 years	1	-	-	-	-	-	-	-
45 to 54 years	2	-	-	-	-	-	-	-
55 to 64 years	-	-	-	-	2	-	-	-
65 years and over	1	-	-	-	-	-	-	-
	6	4	-	-	2	1	-	-

Deaths are in relation to the total number of notified cases on the register.

TUBERCULOSIS REGISTER.

At the end of the year our Register counted 154 cases of pulmonary and 9 cases of non-pulmonary Tuberculosis.

YEARLY FIGURES FOR THE LAST DECADE.

YEAR	NEW. CASES		DEATHS	
	Pulmonary	Non-pulmonary	Pulmonary	Non-pulmonary
1949	19	5	8	-
1950	22	2	6	3
1951	17	3	6	1
1952	16	3	11	-
1953	26	1	5	2
1954	13	1	7	-
1955	18	-	3	-
1956	17	-	5	-
1957	9	1	2	1
1958	10	-	3	-

GENERAL PUBLIC HEALTH.

TUBERCULOSIS. Mass Radiography.

I am indebted to Dr. R. J. Ponter, the Director of the Dudley Mass Radiography Service for the following information:-

"A Survey was carried out in Sedgley from 13th February to 13th March, 1958.

A total of 2,070 persons were X-rayed in the following groups:-

Group	Male	Female	TOTAL
Gibbons Bros. Ltd.,	328	113	441
Clifford Williams, Ltd.	3	111	114
Burton Road Hospital - Patients	200	215	415
" " " Staff	19	17	36
Miscellaneous firms	81	5	86
Public	399	577	976
Doctors cases	2	-	2
 Totals	 1,032	 1,038	 2,070

Of the total of 2,070, 67 persons were recalled for large films and 28 for clinical examinations by the Medical Director, with the following results:-

8 cases were referred to the Chest Clinic as possibly Active Tuberculosis.

6 cases were referred to the Chest Clinic as Inactive Tuberculosis.

Other action was taken on 3 cases of Inactive Tuberculosis.

3 cases were referred to the Chest Clinic as Non-Tuberculous abnormalities.

Other action was taken on 16 other cases of Non-Tuberculous abnormalities.

Rate of Active Tuberculosis 3.9 per thousand examined. "

If one considers that by the Survey a rate of 3.9 per thousand of active tuberculosis has been found one could, converting this rate to a population of 25,330, expect approximately 98 cases of undetected tuberculosis in the community. If therefore any doubts exist with regard to the value of the service, the facts speak for themselves.

TUBERCULOSIS. Rehousing.

The Council through its Tenancies Committee continues to give priority to the re-housing of Tuberculosis patients where considered essential in the interest of the patient and the affected family.

CLEAN AIR.

The policy for Clean Air is a national one in which everyone has a part to play including individual householders whose domestic chimneys contribute some 45% of all the smoke discharged in the country.

During the last few years considerable publicity has been given to the problem of cleaning the air we breathe. Apart from the fact that smoke creates dirt and squalor and blackens and corrodes buildings, it has been proved beyond doubt that it has a deleterious effect upon health.

The only effective way of ameliorating the situation is making of Smoke Control Orders under Section II of the Clean Air Act, 1956. During the two years since the Act was operative 125 Local Authorities have decided to use their powers to make such Orders.

In future Council Estates, it should remain a condition of tenancy from the start that only smokeless fuels should be burned, otherwise they will burn coal when they go in, only to be prohibited from doing so later.

The task of establishing a smoke control area, in an area in which coal burning houses now exist, will be a considerable one and will involve individual inspection of each house to ascertain that the fireplaces used are capable of burning smokeless fuel and if not then advising the tenant of the adaptations or replacements which will have to be carried out and as to what contributory grants towards the cost can be made.

FOOD HYGIENE.

Now that the first impact of the Food Hygiene Regulations has been absorbed and accepted by shop owners and food handlers, the conditions now prevailing in the shops in the district can on the whole be regarded as satisfactory. Nevertheless, vigilance and frequency of inspection by your Public Health Inspector of every shop and place in which food is handled or purveyed is still necessary to ensure that the Regulations are being complied with.

There have been no cases of food poisoning in the district during the year but the occurrence of outbreaks of food poisoning from time to time throughout the country draws attention to the necessity for the strictest personal cleanliness of all food handlers whether in the preparation of food or in the transport and storage of same.

The provision of all the modern facilities, refrigerators, hot water units, tiled walls, etc., is of little avail if the commonsense basic principles of personal cleanliness and hygiene whether in the shop or in the home, are not observed by all.

FLUORIDATION OF WATER AND THE PREVENTION OF DENTAL DECAY.

I submit extracts from the Ministry of Health Reference Note No. 9 on the subject.

"At least half of the children entering school at 5 years of age already have 5 or 6 defective teeth."

"It is most important therefore that dental caries should be reduced and the most effective means of achieving this is the fluoridation of water supplied in those areas where the fluoride is low. Fluoride is present in small amounts in most water supplies."

"As regards medical aspects, there is no scientific evidence whatever that fluoride at a level of one part per million has any deleterious effect on the health of adults or children. Fluoridation is not medication, It is a preventive measure. In one sense fluoridation may be compared with chlorination. Chlorine is added to water supplies to prevent the growth of harmful organisms. Fluoride is to be added to prevent the decay of children's teeth and to prevent consequent illhealth then and in later life. There is already enough evidence of both the value and harmlessness of fluoridation to justify its controlled use in this country."

"As regards the adverse effects on water, the addition of one part per million of fluoride does not affect its taste, its steam raising properties, its effect on cooking or on cooking utensils or on plumbing, nor its hardness or softness."

I have been in touch with the Water Engineer and he informs me that the matter is being investigated on a National level and that the Ministry is now carrying out an experimental survey of the water supplies of some selected communities to which fluoridation has been introduced.

In view of the evidence which has now been amassed, particularly in the United States, in favour of fluoridation of water, I would recommend that fluoridation be introduced to the Sedgley supply subject to the Ministry's final report being favourable.

RADIATION HAZARDS.

A Sessional Meeting of the Royal Society for the Promotion of Health was held in the Wulfrun Hall, Wolverhampton, in December, which I attended. The meeting was convened not for the purpose of giving a presentation or interpretation of an official or central directive by the Government on the subject, but purely for the purpose of giving a basis for thought by local authorities on the subject.

Today industry is giving its attention to the possibilities of making use of radio-active substances and irradiating apparatus. So, as the harnessing of atomic or nuclear power or radiation to industry develops, it follows that in the not too distant future consideration will have to be given to radiation hazards and to the need for information as to the control of the operating hazards and as to the disposal of radio-active wastes.

No doubt a directive Circular will be issued in due course by the Ministry of Health or other responsible central authority for the guidance of local authorities.

It should be the responsibility of a central Government controlled body with its highly trained staff, to issue to factories and industry such kinds and amounts of radio-active material that it is satisfied may be safely used, and used only in specified premises.

A list of issues should be supplied to the Medical Officer of Health of the district to which the material is sent and the location of the premises using it. The factory or institution should consult with the local authority about the disposal of radio-active wastes.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The Sedgley Urban District, with the exception of the Goldthorn Park area, is supplied by the South Staffordshire Waterworks Company. The Goldthorn Park area receives its supply from the Wolverhampton Corporation Water Undertaking.

I am indebted to Mr. R. A. Robertson, B.Sc., M.Inst.C.E. and to Mr. Brian L. McMillan, B.Sc., M.Inst.C.E. the respective Engineers-in-Chief of the undermentioned undertakings, for the following information.

(a) SOUTH STAFFORDSHIRE WATERWORKS COMPANY

- (i) The water supply to the area has been satisfactory both in quality and quantity.

Sedgley district is supplied with water from service reservoirs at Dudley, the supply to which can be maintained from four pumping stations in the Smestow Valley and two pumping stations near Lichfield.

- (ii) The greater part of the water supplied to Sedgley comes from two of the Smestow Valley Stations. Chlorination is practised at both Stations but owing to practical difficulties, samples of the raw water are not obtainable.

During 1958, 38 samples were examined from Sedgley Tanks, 20 from Sedgley Reservoir and 19 from the Waterman's house. With the exception of one sample from Sedgley Reservoir, which contained irregular type bacteria, all the samples were free from coliform bacteria.

The average chemical results for 1958 of the 19 samples from the Waterman's house, Sedgley, were:-

pH	...	...	7.1		
Alkalinity (CaCO ₃)	...	80	parts per million		
Chlorides (Cl)	...	37.1	" "	"	
Ammoniacal Nitrogen (N)	...	Trace	" "	"	
Albuminoid Nitrogen (N)	...	Trace	" "	"	
Oxidised Nitrogen (N)	...	2.8	" "	"	
Oxygen absorbed (3 hr. at 20° C)		.12	" "	"	
Temporary Hardness	...	75	" "	"	
Permanent Hardness	...	61	" "	"	
Total Hardness	...	136	" "	"	
Iron (Fe)	...	.03	" "	"	
Manganese (Mn)	...	Nil	" "	"	
Zinc (Zn)	...	Nil	" "	"	
Poisonous Metals (Cu & Pb)	...	Nil	" "	"	
Free Cl	...	Nil	" "	"	

- (iii) The waters are not liable to plumbo-solvency, the 19 samples from the Waterman's house being all free from any detectable quantities of lead.
- (iv) Chlorination is practised at most of the pumping stations as a precautionary measure.
In cases of possible contamination in the event of burst or damaged mains, emptying reservoirs, etc., emergency chlorination is performed. Special apparatus and staff are available for this work. New mains, etc., are not brought into use until the water has been examined and pronounced satisfactory.
- (v) The following are particulars of the number of houses supplied and the approximate population:-

	Houses	Estimated Population.
(a) Houses supplied direct	6,648	24,920
(b) Houses supplied by outside taps at 31st Dec. 1958	531	1,518
Total	7,179	26,438

Note: The population for items (a) is calculated on a basis of 3.75 persons per house.
Item (b) is calculated on a basis of 2.86 persons per house.

(b) WOLVERHAMPTON CORPORATION WATER UNDERTAKING.

The water supplied by the Wolverhampton Corporation Water Undertaking to the Goldthorn Park area is derived from a number of sources of supply and the relative properties depend on the part of the district and varying circumstances.

- (i) The water supply has been satisfactory in quantity and quality.
- (ii) The following is a summary of the Bacteriological examination of water going into distribution.

Number of samples taken	Presumptive Coli-aerogens per ml.			
	0	1 - 2	3 - 10	Over 10
869	823	33	5	8
Percentage of samples taken	94.7	3.8	0.6	0.9

- (iii) The water supplied is not liable to have plumbo-solvent action.
- (iv) There has been no known contamination of the water supply subsequent to leaving the works.
- (v) The number of dwelling houses in the Goldthorn Park area supplied direct is 937 and the population thereof estimated at 3,280. None are supplied by standpipe.

SEWERAGE AND SEWAGE DISPOSAL.

I am indebted to your Surveyor, Mr. W.M. Jones, B.Sc.(Eng.), A.M.I.C.E., for the following report:-

The only construction of foul or surface water sewers undertaken during the year was at Green Lane, Upper Gornal, where work was done to obviate further flooding of houses and gardens in that vicinity.

It was not possible unfortunately during 1958 to put in hand the foul sewerage scheme for Cotwallend and Catholic Lane, but it is anticipated that early in 1959 will see the commencement of this scheme which will have the effect of dispensing with numerous cesspools to houses in those two roads and also Moden Hill, and will also allow considerable private development to proceed.

The heavy rainfall of the summer of 1958 caused some surcharging of storm sewers, and schemes are being prepared for dealing with these during 1959.

At Lower Gornal Sewage Disposal Works, a contract was commenced for the construction of additional sludge drying beds and pumphouse, designed to improve the effluent from these Works, until the major extension scheme comes into operation. It is anticipated that early in 1959, a start will be possible on the major scheme.

The effluent from the Gospel End Works continues to deteriorate as more and more development proceeds in the catchment area. The Council are fully aware of the unsatisfactory conditions prevailing at these Works and propose to undertake in the near future, the improvement works so urgently necessary.

PUBLIC CONVENIENCES.

No new construction was undertaken during the year. Practically every public convenience in the District suffered damage by hooligans continuously throughout the year.

MUNICIPAL CEMETERY AND CREMATORIUM.

The lawn type Cemetery at Gornal Wood, administered jointly by Sedgley, Dudley and Brierley Hill Councils, has continued to improve in appearance as trees have become better established and the grass improved in texture. The Superintendent and Registrar by skilful planting of shrubs and plants, particularly roses, is to be congratulated on making the Cemetery a place of beauty.

The contract for the Crematorium was commenced during the year and it is hoped that this building will be completed early in 1960.

SANITARY INSPECTION.

The systematic inspection of the district has been carried out in an efficient manner. Details are given in the report of the Chief Health Inspector.

HOUSING.

Houses completed during the period 1st January to the 31st December 1958, were:-

Municipal:-			
Houses	...	...	16
Flats	...	...	58
Private Houses	...	...	229

During the year Monument Lane Estate was completed and 82 flats at Jockey Fields were commenced and almost completed during the year.

The number of private houses under construction at the 31st December 1958 was 293

At the end of the year there were 865 applicants on the Council's Housing waiting list.

The housing subsidy restriction, apart from the specified classes, has meant that all new houses constructed during the year were for slum clearance.

In my opening remarks I have already commented on the need for houses for general purposes and this is supported by the number of applicants as shown on the waiting list above. In the present existing position as to the availability of houses, general need applicants are at a disadvantage.

The Housing Committee have had to rely solely for general need purposes upon re-lets - rather a limited number each year. This in my opinion is an unsatisfactory position. Consideration and thought might therefore be given to the feasibility of providing houses for general need purposes at economic rents.

Further information as to the housing situation is given in the report of the Public Health Inspector.

CLEARANCE AREAS.

Four official representations were made in the course of the year:-

Kent Street No. 3 Clearance Area	1st July, 1958.
Kent Street No. 4 Clearance Area	1st July, 1958.
Ox Street and Stone Street Clearance Area	1st July, 1958
Pale Street Clearance Area	4th November, 1958.

Confirmation is still awaited in respect of all the above.

REPORT OF THE PUBLIC HEALTH INSPECTOR.HOUSING.

I show on Table I our housing progress during the year. This is an abstract of the relevant details from the quarterly returns submitted to the Ministry of Housing and Local Government.

In slum clearance, a year is a very short period in which to obtain an accurate picture of what is taking place, I give therefore, in Tables II and III, copies of the tabular statements submitted quarterly to the Health Committee. These give the position at the 31st December, 1958.

Speaking generally, our slum clearance programme is proceeding very well. We have completed our original five year programme in well under the five years. With the sanction of the Ministry, the programme has now been amended from 266 to 400 houses.

This extension will not, however, see the end of our slum clearance activities, and a second five year programme is in course of preparation. Indeed, the demolition of our older houses will be a continuous process and will be with us for a long time. A point to be decided in the future will surely be how long we expect our existing houses to last. It is not only disrepair and decay of the structure which has to be considered, but the design and the lack of those amenities which other families enjoy.

With regard to the rehousing of general applicants on the waiting list, we have of necessity been somewhat retarded during the year. The stopping of subsidy for all houses, apart from the specified classes, has meant that all new houses constructed during the year were for slum clearance. Ordinary applicants had to be content with the casual vacancies which arose in our general pool of houses.

During the year, 162 families in all were found accommodation. This figure includes slum clearance, rehousing from the application list, and the transfer of families to more suitable accommodation.

At the end of the year there were 865 names on the application list, as follows:-

Number of applications from those in lodgings	...	368
Number of applications from tenants of houses	...	289
Number of applications from outside the district	...	79
Number of applications for single bedroom flats	...	92
Number of applicants approved but not yet rehoused	...	37
		865

It is unfortunate that the great majority of our applicants are so loath to accept the tenancy of flats. The semi-detached house is what everyone wants, even blocks of four houses are unpopular. Yet, in our existing houses the number of uncultivated gardens is very large indeed.

The question of garage accommodation is becoming a pressing one. In a number of cases it is the main point with the applicant, who often regards the housing of his car as of more importance than that of his family.

At the present time, by far the greatest number of applicants are families who are already tenants of Council owned property. They want something better, something in another locality to be near mother or away from their present neighbourhood, or merely because they want a change or a house where they can erect a garage. Because of this clamour for changes of residence, certain houses are in great demand, while others are most difficult to let. Surely, the great housing need of our people has largely been solved.

Improvement Grants.

Since 1955, when we approved our first Improvement Grant, a total of 64 applications have been received - apart from a number of enquiries which did not reach the application stage, generally owing to the unsuitable nature of the premises. Of these 64 applications, 30 have been approved for Grant, the total of the Grants approved amounting to £4,845.

Speaking generally, the Grants have not been taken advantage of to the extent which was hoped. It is doubted very much whether the comparatively few houses which have been improved will make any material difference to the overall prevention of decay in our houses.

All the Grants we have so far approved have been either for owner-occupiers or for owners improving houses for relatives. The scheme is not attractive enough to the owner who is depending on the income from rented property, and this is the very class of property which is deteriorating rapidly.

FOOD HYGIENE AND INSPECTION.

There are five private slaughterhouses in the district and 100% meat inspection is carried out. Table IV gives details of the meat inspection carried out at these slaughterhouses.

A very good class of meat is produced at all our slaughterhouses and the comparatively high figures shown in the column "Part condemned for other diseases" as regards sheep is accounted for merely because of the large number of livers which had to be rejected.

Close attention has been paid to hygiene in food premises throughout the year, and a total of 78 notices were served for minor contraventions of the Regulations.

School kitchens and dining halls in the district caused some discussions with the Education Authority which resulted in a marked improvement in certain premises. Further work is promised in this connection.

During the year, 38 samples of ice-cream were taken and submitted for analysis. Of these samples, 37 were placed in Grade I and one in Grade II. Ice-cream now appears to have reached the stage when it can be claimed to be practically safe from contamination. There are no manufacturers of ice-cream in the district, and all shops sell only pre-packed ice-cream supplied by large firms.

In addition to the above, 25 samples of ice-lollies were submitted for analysis. Of these, two were found to be unsatisfactory. Coliform bacilli were present in each case, and in one of the samples the colony count reached a total of 680 per c.c.

During the year, the following samples were taken by the County Inspector and submitted for analysis.

Milk:

Milk Pasteurised	13
Milk Sterilised	20
Milk T.T.	7
Milk T.T. Pasteurised	12
Milk T.T. Pasteurised Channel Island	8
	—
	60
	All Genuine.

General Foods.

Number of samples taken	63
Number of samples genuine	55
Number of samples adulterated	8

<u>Adulterated samples.</u>	<u>Action Taken.</u>
Vinegar, Informal.	30% deficient of acetic acid.)
Non-brewed Condiment.	30% deficient of acetic acid.)
Milk Loaf.	Not more than half the water used in the preparation is derived from added milk. <u>Word "Milk" not to be used in future to describe loaf.</u>
Casserole Steak.	Contained 68% meat and should contain 75%. <u>Sold to importers on basis of 65% meat.</u>
Pork Luncheon Meat.	Contained 68% meat and should contain 75%. <u>Cautioned.</u>
Syrup Lime Spread.	Contained liquid glucose and cannot be properly described as glucose. <u>Firm gone out of business.</u>
Barley Sugar.	Do not contain glucose as declared. <u>Labels to be amended.</u>
Extract of Cod Liver Oil and Malt Flavouring.	Deficient in Vitamin A content. <u>Matter under investigation.</u>

In addition, 47 samples of milk were taken for bacteriological examination. All proved satisfactory.

I give below a list of the various foodstuffs condemned in shops by this department during the year.

Tins of Fruit	...	...	322
Tins of Tomatoes	...	...	144
Tins of Meat	...	...	40
Tins of Milk	...	...	11
Tins of Fish	...	...	9
Tins of Peas	...	...	8
Tins of Milk Pudding	...	...	5
Tins of Soup	...	...	3
Jars of Fish Paste	...	...	2
Jars of Pickled Onions	...	...	1
Cheese Waste	...	...	2½ stone
Fish	...	...	2½ stone
Minced Meat	...	...	2 Stone 2 Lbs.

PUBLIC CLEANSING.

No municipal dustbin scheme is operated in this district, the provision of bins still being a matter for the individual owner or occupier. No great difficulty is experienced in the replacement of defective bins, however, and it is comparatively rare that we have to resort to supplying bins in default. Every effort is made to encourage the use of a standard bin ($2\frac{1}{2}$ cu. ft. B.S.S. pattern), but this is far from being 100 per cent successful. Nevertheless, we have very little trouble from odd shapes and sizes of bins.

Refuse is collected by means of S. & D. freighters, three of which are employed full time on refuse removal, and a fourth for two days a week. This latter vehicle will be able to extend its round as the district expands. One cause for some slight anxiety is that this fourth vehicle, which was originally a spare vehicle, is now utilised full time on refuse removal, salvage collection and other miscellaneous work. We have, therefore, no spare vehicle, and a breakdown of any length of time could have a serious effect on the running of the department. The question of an additional vehicle is becoming rather pressing.

All bins are emptied weekly and a regular collection at a known time is made at all premises. This is very helpful to the residents who know when to expect collection and can have the bin available, especially in those cases where access is normally not possible or difficult.

On Bank Holidays no collections are made, and the streets affected are left until the following week when all refuse is cleared at the normal times.

This system has now been in operation for several years and has been accomplished mainly by the efforts of the workmen, encouraged by a Bin Bonus Scheme which gives them an incentive to work to this regular time table. Most of our men have been with us for a good number of years and we have very few changes in personnel.

The Bonus Scheme has also enabled us to work with a reduced staff. Our official establishment, for all operations in the department, is 25 men, but at no time during the year had we more than 23 men employed. With these men we carried on successfully in spite of holidays and absences through sickness.

There was very little absence from sickness during the year, the average being a little over 2 weeks per man per annum.

In Table V. is shown the absences month by month throughout the year. This shows that the operations of the department were actually carried out by a staff equivalent to 21 men.

Refuse disposal was carried out at our tip in Holloway Street during the year. Disposal is controlled by means of a Weather-ill mechanical shovel. Two men are employed on the tip, one driving the machine and the other reclaiming salvage and assisting generally. No complaints regarding our operations were received during the year, and there were no infestations of any kind on the site.

Salvage is collected separately from shops and business premises, although a little is brought in by the refuse collectors. Like most districts we were restricted as to the amount of paper we could dispose of, and towards the end of the year the market for tins began to fall.

The amounts received during the year from the sale of salvageable materials was as follows:

Waste paper	...	£663
Tins	...	126
Scrap Metal	...	47
Rags	...	8
		£844

CLEAN AIR ACT.

This Act involved the Department in considerable work during the year. Fortunately, there is very little industry in the district, but there were two major problems of long standing, both from nationalised undertakings.

During the year the National Coal Board electrified their equipment and one source of smoke disappeared immediately. The Hospital Board has been much slower to remedy the smoke from their boiler plant. Nevertheless, one boiler was fitted with a mechanical stoker with a consequent reduction in the smoke emitted. The remainder of the plant is scheduled for a complete reconstruction.

Our first Smoke Control Area was declared during the year consisting of 512 houses on an area of 60.44 acres. Of these houses 182 were privately owned and the remainder were local authority houses, both post-war and pre-war.

The particular area, although on the leeward side of our district, was chosen because

- (1) it contained our largest post-war Council estate where suitable appliances had been fitted;
- (2) it was the most built up part of our district apart from the redevelopment areas;
- (3) it contained a good cross-section of housing development - pre-war Council houses, post-war Council houses and private houses;
- (4) it contained no old houses which would have been uneconomic to adapt, or would have meant their exclusion;
- (5) it contained no industrial premises.

CARAVANS.

The problem with caravans is not a serious one in this district. There are no licensed caravan sites, although there are a few odd caravans in unobtrusive spots.

We occasionally have visits from the nomadic type of caravan dweller and this generally gives rise to complaints from local residents. There appears to me to be only one solution to this problem - that of providing sites for these people. No one, however, is prepared to face up to it.

RENT ACT.

The latest Rent Act appears to be following the course of previous Rent Acts. After a little initial activity, it quickly becomes another piece of forgotten legislation.

In January, 9 Certificates of Disrepair were issued, one was issued in February and three in March. In April 5 were cancelled. Since then, no action whatever has been called for.

ANIMAL AND INSECT PESTS.

On the whole, the year has been a very quiet one. The sewers and sewage disposal works were treated for rats. All farms in the district were visited and inspected for signs of rodent infestation. During our normal work, especially in food premises, signs of rats are always sought. No major infestations were discovered, but steady treatment of premises where any rats were suspected was carried out.

As far as insect pests are concerned there is actually less to report. Only occasionally has any action been necessary, and in every case the matter was of a minor nature.

STAFF.

Throughout most of the year our establishment of Three inspectors was reduced to two through Mr. Kirk obtaining another appointment and his place not being filled. This had a very serious effect on the work of the department and my best thanks are due to all members of the staff who carried on so well under difficult conditions.

TABLE I.

HOUSING ACTION.A. Houses demolished

<u>In Clearance Area</u>	<u>Houses Demolished</u>	<u>Displaced during year</u>	
		<u>Persons</u>	<u>Families</u>
(1) Houses unfit for human habitation ...	26	108	32
(2) Houses on land acquired under Sec. 43(2) Housing Act, 1957 ...	10	15	7
<u>Not in Clearance Areas</u>			
(3) As a result of formal or informal procedure under Sec. 17(1) Housing Act, 1957 ...	27	43	14

B. Unfit Houses Closed

(4) Parts of buildings closed under Sec. 18, Housing Act, 1957 ...	1	4	1
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C. Unfit Houses made fit and Houses in which Defects were remedied

(5) After informal action by local authority	32
(6) After formal notice under Public Health Acts ...	...	...	6

TABLE II.SLUM CLEARANCE - PROGRESS STATEMENT
PART A - INDIVIDUAL ACTION

	<u>Grand Totals</u>
(1) Individual Demolition Orders, Closing Orders made and Undertakings of all kinds accepted since 1/1/37.	369
(2) Proportion of above included in Closing Orders; Undertakings not to use for habitation, and Undertakings to make fit.	71
(3) Total demolition Orders made and included in (1) above -	<u>298</u> 369
(4) Total number of Orders, etc., made and included in (1) above dealt with between 1937 and 2nd November, 1955.	302
(5) Total number of Orders, etc., made and included in (1) above dealt with between 2nd November and 31st December, 1958.	<u>67</u> 369
<hr/>	
<u>II - DISPOSAL OF PROPERTIES UNDER DEMOLITION ORDER.</u>	
(6) Total houses included in (3) above which have been demolished.	261
(7) Total houses included in (3) above which are vacant and are awaiting demolition	<u>33</u> 294
(8) Total houses included in (3) above which are still occupied	<u>4</u> 298
(9) Total families rehoused by Council from houses included at (3) above - (a) before 2/11/55. (b) after 2/11/55.	<u>230</u> <u>64</u> 294

TABLE III.

PART B - CLEARANCE OR OTHER GROUP ACTION

Clearance Progress

	Demolished	Vacant awaiting demolition	Still Occupied	Total	Before 2/11/55.	After 2/11/55.	Waiting rehousing by Council	Rehoused privately or awaiting private rehousing	Total
(10) Houses included in Monument Lane C.P.O.	10	Nil	10	9	Nil	1	Nil	10	
(11) Houses included in Cricket Meadow C.P.O.	18	Nil	18	2	—	13	Nil	3	18
(12) Unfit houses included in Hermit St. C.P.O.	14	4	Nil	18	8	10	Nil	—	18
(13) Unfit houses included in Kent St. C.P.O.	26	Nil	26	26	Nil	36	Nil	2	38
Other houses included in Kent St. C.P.O.	5	6	1	12)	Nil	12)	Nil	—	
(14) Unfit houses included in Holloway St. C.P.O.	Nil	20	2	22)	22)	7	Nil	30	
Other houses included in Holloway St. C.P.O.	Nil	3	5	8)	8)	—	—	—	
(15) Unfit houses included in Club Row C.P.O.	Nil	14	28	42)	42)	—	Nil	—	46
Other houses included in Club Row C.P.O.	Nil	1	3	—	—	—	12	31	3
	73	48	39	160	19	94	38	9	160

TABLE IV.

MEAT INSPECTION.

TUBERCULOSIS		OTHER DISEASES	
Number Inspected	Whole carcasses condemned.	Part condemned	Percentage condemned
Cattle Including Calves	-	25	2.6
Pigs	4,558	4	3.4
Sheep	7,446	7	16.3
		168	17.5
		7	3.9
		1,206	

Total weight of meat condemned during the year.

5 Tons. 7 Cwts. 2 Qrs. 7 Lbs.

TABLE V.
PUBLIC CLEANSING.

	Hours Lost through sickness	Hours lost through holidays	Under establishment	Total
January (4 weeks)	361	17	264	642
February (4 weeks)	370	44	176	590
March (5 weeks)	153	97	220	470
April (4 weeks)	325	238	176	739
May (5 weeks)	175	392	264	831
June (4 weeks)	9	141	352	502
July (4 weeks)	137	138	352	627
August (5 weeks)	220	905	440	1,565
September (4 weeks)	476	124	264	864
October (4 weeks)	18	274	440	732
November (5 weeks)	124	71	660	855
December (4 weeks)	18	401	528	947
				2,842
				9,364
				4,136

TABLE VI.

INSPECTIONS.

	<u>Number of Inspections</u>	<u>Notices Served</u>	<u>Number of Re-Inspections</u>	<u>Notices Complied</u>
January	339	19	71	32
February	387	15	32	25
March and April	597	22	84	34
May	252	8	60	9
June and July	586	38	76	13
August	233	7	7	6
September	290	17	19	11
October	411	15	56	9
November	237	21	35	22
December	247	6	20	8
				168
	3,579			460
				169

FACTORIES ACTS, 1937 and 1948.Part I of the Act

1. Inspections for purpose of provisions as to health (including inspections made by Public Health Inspectors.)

PREMISES	Number on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
(i) Factories in which sec. 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	7	13	1	Nil
(ii) Factories not included in (i) in which sec. 7 is enforced by the Local Authority ...	71	97	5	Nil
(iii) Other premises in which sec. 7 is enforced by the Local Authority (excluding out-workers' premises)	Nil	Nil	Nil	Nil
Total ...	78	110	6	Nil

2. Cases in which defects were found.

PARTICULARS.	Number of cases in which defects were found				No. of cases in which prosecu- tions were instituted.	
	Found	Referred				
		Reme- died	To H.M. Inspec- tor	By H.M. Inspec- tor		
Want of cleanliness	3	3	-	-	-	
Overcrowding	-	-	-	-	-	
Unreasonable temperature ...	-	-	-	-	-	
Inadequate ventilation ...	-	-	-	-	-	
Ineffective drainage of floors	-	-	-	-	-	
Sanitary Conveniences:-						
(a) Insufficient	1	1	-	-	-	
(b) Unsuitable or defective	2	2	-	-	-	
(c) Not separate for sexes	-	-	-	-	-	
Other offences against the Act (not including offences relat- ing to Outwork)	-	-	-	-	-	
Total ...	6	6	-	-	-	

Part VIII of the ActOUTWORK

Section 110

NATURE OF WORK	Number of out-workers	Number of cases of default in sending lists to the Council	Number of prosecutions for failure to supply list.
Wearing Apparel (Making etc.)	71	-	-
Carding etc. of buttons, etc.	6	-	-
Total	77	-	-

D. J. W. ROBERTSON.

Chief Public Health Inspector.

November, 1959

